

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
<b>FEE DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>	<i>KPS</i>	45	1/17/01
<b>FORMALITY REVIEW</b>		943	3-9-1
<b>RESPONSE FORMALITY REVIEW</b>	<i>IN</i>	778	5/18/01
1 11 11	<i>SPZ</i>	852	11-07-a

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 — (Through numeral) ... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date	
1	1	5
2	10	30
3	02	1
4	02	03
5	✓	✓
6	N	N
7	✓	✓
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16	N	N
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29	N	N
30	✓	✓
31	N	N
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Claim	Date	
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If more than 150 claims or 10 actions  
staple additional sheet here